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Please read these instructions before you complete your application:

1. To find out the jobs for which we are hiring:
  - Visit our web site at [www.jccEgov.com](http://www.jccEgov.com)
  - Call our Job Line recording at (757) 253-6736
  - Look in the Sunday Daily Press classified ads
  - Look at the job postings in the Human Resource Department, or the Satellite Office
  - Watch James City County Cable Channel 48
2. You may get an application by:
  - Visiting our web site at [www.jccEgov.com](http://www.jccEgov.com)
  - Calling our Job Line at (757) 253-6736 and requesting an application be mailed or faxed to you
  - Picking one up at the Human Resource Department or Satellite Office
3. Complete a James City County application for each position for which you are applying. Please be sure to include the position number.
4. Complete the entire application. Incomplete applications may not be considered unless completed prior to testing or interview.
5. You may attach a resume to a completed application. Resumes are not accepted instead of an application.
6. Fill out the EEO information. It is for statistical purposes only. It is detached before the application is sent to the hiring department.
7. *We must receive your application in our office by 5:00 p.m. on the closing date.* You may mail, hand deliver, or fax your application to the address or fax number listed above.

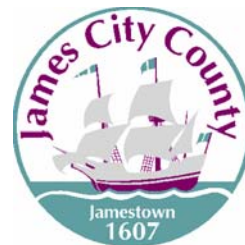
## When Will You Hear From Us?

The Human Resource Department staff is unable to personally interview each applicant. We do inform you of the status of your application as follow:

1. If you are not selected for an interview, we will inform you by letter, usually within three weeks after the closing date.
2. If you are selected for an interview, you will be called on the telephone by the hiring department. Please make arrangements to have a place where we may leave a message.
3. If you are selected for the position, you will be called by the Human Resource Department or hiring department staff.
4. If you are interviewed but not selected for the position, we will inform you by letter.

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*Thank you for your interest in James City County, an equal opportunity employer.  
Let us know how our service is and how we can serve you better.  
Please put any suggestions or comments on the back of this sheet  
and turn it in with your application.*



## EMPLOYMENT APPLICATION

**POSITION APPLIED FOR** \_\_\_\_\_

<b>Name</b> Last: _____ First: _____ MI. _____		<b>Social Security Number</b> _____/_____/_____
<b>Address</b> Street: _____ Apt: _____ City: _____ State: _____ Zip Code: _____		<b>Contact</b> Home phone: (_____) _____ Work phone: (_____) _____ E-mail: _____ May we contact you at work? Yes <input type="checkbox"/> No <input type="checkbox"/>

### Education

Do you have a high school diploma or GED? Yes ☐ No ☐ Name and location of school \_\_\_\_\_

Name and Location (City & State) of College(s) or University(ies) Attended	Yes		Total Credit Hours	Major Field of Study	Degree Received?	Type (BS, MA, PhD)
	From	To				
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

List education or training not covered above, such as vocational school, correspondence courses, in-service training, which you feel relates to the position for which you are applying.

List qualifications relevant to the position which are not covered elsewhere in your application (such as foreign language proficiency, professional licenses or certifications, skills in operation of machines/equipment, technical skills and/or computer, or other special training). For licenses and certifications include date and place of issuance and date of expiration.

## Personal Information

Are you currently employed by James City County? Yes ☒ No ☒

Are you under the age of 18? Yes ☒ No ☒  
If yes, give birth date \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Have you ever worked for James City County? Yes ☒ No ☒

If yes, give department \_\_\_\_\_

From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM YYYY MM YYYY

Do you have any relatives employed by James City County? Yes ☐ No ☐

If yes, name \_\_\_\_\_

Relationship \_\_\_\_\_

Department \_\_\_\_\_

Do you have a valid driver's license? Yes ☐ No ☐

If yes, please give State \_\_\_\_\_ and

Customer No. \_\_\_\_\_

Do you have a valid commercial driver's license? Yes ☐ No ☐

If yes, please give type \_\_\_\_\_

Please give State \_\_\_\_\_

Are you a citizen of the U.S. or are you otherwise legally eligible for employment in the U.S.? Yes ☐ No ☐  
(Anyone offered employment is required to provide proper identification and documentation of eligibility for employment in the U.S.)

Citizenship status (select one):

☐ U.S. Citizen ☐ U.S. National (Country \_\_\_\_\_) ☐ Permanent Resident Alien

☐ Non-Citizen authorized under Federal law to work in the U.S. Type of Visa \_\_\_\_\_

Convictions, dismissals from employment, or less than honorable discharges from military service will not necessarily be a bar to employment. Factors such as age at the time of the offense, date of the offense, seriousness and nature of the violation and rehabilitation will be taken into account.

### Dismissal from employment or other than honorable discharges from military service.

Have you been:

a. Fired or asked to resign from employment?

\* Yes ☐ \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) No ☐

b. Separated from military service under **OTHER** than honorable conditions?

\* Yes ☐ \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) No ☐

☐ I was never in the military

### Conviction for violation of law

Have you been convicted of a violation of law (felony, misdemeanor, traffic, etc.)? \* Yes ☐ \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) No ☐

In answering this question, you need NOT report the following:

- (1) Arrests not followed by convictions;
- (2) Convictions which were annulled or expunged;
- (3) Offense for which you were tried as a minor or juvenile; and
- (4) Conviction of a misdemeanor in which the period of twenty years has elapsed since the date the sentence was fulfilled and during which elapsed time there has not been any subsequent arrest or conviction.

\*If you answered "Yes" to any part of this, you must explain in detail below:

## Employment History

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Give a complete record of your employment history including part-time work, military service, and volunteer work. **List all experience in order, starting with your most recent position.** Account for all periods of unemployment. Attach additional sheets if necessary. Resumes may be attached for additional information; however, the application must be completed. **DO NOT INDICATE "See resume."**

May we contact your present employer regarding your qualifications and record of employment? Yes ☐ No ☐

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

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Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

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Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

## Employment History Continuation Sheet

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Give a complete record of your employment history including part-time work, military service, and volunteer work. **List all experience in order, starting with your most recent position.** Account for all periods of unemployment. Attach additional sheets if necessary. Resumes may be attached for additional information; however, the application must be completed. **DO NOT INDICATE "See resume."**

May we contact your present employer regarding your qualifications and record of employment? Yes ☐ No ☐

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

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Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

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Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Date Employed (MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_ per \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Description of work:

# Privacy Act Notice for Employment Forms

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## *Notice to Applicants*

This information is provided pursuant to the Privacy Protection Act of 1976 for individuals supplying information for inclusion in a system of records.

## *Policy*

The policy of James City County is to collect, maintain, use and disseminate only the personal information required by law to accomplish a proper purpose.

## *Purpose, Use, Access, and Dissemination*

Information furnished will be used primarily by James City County departments/division and agencies to determine qualifications for employment, eligibility for transfer, reinstatement, promotion, and/or demotion. All or part of this information may be furnished to others as indicated below:

1. Representatives from County agencies, if required to determine employment suitability.
2. Representatives of Federal, State, and local agencies engaged in investigating violations of the law.
3. Individuals or agencies requesting statistical data exclusive of personal identification.
4. Requesting agencies possessing your voluntary release of information and assuming confidential protection of information released.

## *Effects of Nondisclosure*

It is in your best interest to answer all questions. Your failure to complete this form may jeopardize your opportunity for employment.

## **Certification**

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1. I have read and understand the above Privacy Act Notice for Employment Forms.
2. I hereby certify that this application is a complete record and that all entries and attachments are true and accurate to the best of my knowledge.
3. I authorize
  - James City to conduct a thorough background investigation, except as it pertains to race, origin, sex, age, or other non-job related criteria, to be used relative to my employment with the County. This investigation may include driving record checks and results of drug and alcohol test conducted by previous employer(s); and,
  - My former employers and those listed as references to provide any job related information they have about me, including results of drug and alcohol tests, and I release all concerned from any liability in connection with the release of this information.
4. I hereby agree that James City County may, in accordance with the 1985 Amendments to the Fair Labor Standards Act and the James City County Personnel Policies and Procedures Manual, award to me compensatory leave at the time and one-half rate in lieu of overtime pay for all overtime worked in excess of the maximum allowable number of hours under the County's Overtime Policy for Non-Exempt Employees.
5. I understand that:
  - False or incomplete statements made on the application are grounds for disqualification from employment;
  - I may be required to take a post offer medical examination given at the County's expense, and that my employment may be dependent upon the results of the examination;
  - If I am an applicant for a sworn Police, uniformed Fire or Emergency Medical Services position, a position that requires a CDL, use of a respirator, is physically demanding or defined as safety sensitive, my post offer medical examination and subsequent periodic medical examinations as specified by the County's Physical Exam Program may include drug and alcohol screening; and
  - any employment is conditioned upon successful completion of a probationary period and that James City County employs me "at will" and is not committed to any specific term of employment. This "at will" employment relationship may not be changed by any written document or by contract unless such a change is specifically acknowledged by an authorized executive of this organization.

Signature\_\_\_\_\_Date\_\_\_\_\_

**Position Applied For:** \_\_\_\_\_

## Recruitment Survey

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How did you first find out about this vacancy? (Please select only one.)

Newspaper Ad. If so, please indicate which paper:

- ☐ Daily Press
- ☐ Virginia Gazette
- ☐ Richmond Times-Dispatch
- ☐ Virginia Pilot/Ledger Star
- ☐ Other newspaper \_\_\_\_\_
- ☐ James City County Human Resource Office
- ☐ Virginia Employment Commission
- ☐ Job Line

Internet

- ☐ James City County Web Site
- ☐ Career Builder
- ☐ Other web site: \_\_\_\_\_
- ☐ Friend/Relative
- ☐ Cable Channel
- ☐ County Employee
- ☐ Other \_\_\_\_\_

## Statistical Reporting Information

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In order to meet the requirements of Federal guidelines, we need your cooperation and assistance in completing this form. Participation is confidential. Your replies will not affect your eligibility or opportunity for employment. The data will be used for reporting and personnel research purposes only. It will not be used for the purpose of selecting job applicants.

Sex: Female ☐ Male ☐

### Ethnic Background

Review all ethnic background categories listed below. Determine the one category which best represents your ethnic background. Select the square provided next to that category. *Mark One Square Only.*

- ☐ *White (not of Hispanic origin)*  
All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- ☐ *Black (not of Hispanic origin)*  
All persons having origins in any of the Black racial groups of Africa.
- ☐ *Hispanic*  
All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- ☐ *Asian or Pacific Islander*  
All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ *American Indian or Alaskan Native*  
All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.